

# PROJECT 10073 RECORD

1. DATE - TIME GROUP November 67 2230Z	2. LOCATION KITTANNING, PENNSYLVANIA (1 Witness)
3. SOURCE Civilian	10. CONCLUSION Probable Astro (Possible - DENEb)
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 20 Minutes	11. BRIEF SUMMARY AND ANALYSIS The observer sighted a yellow white object that was like a bright star. The object remained relatively stationary in the sky except it seemed to oscilate about a point.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE Stationary	COMMENTS: The observer was sent a form 117 but failed to return it. The observer did not state how the object dissappeared or if it dissappeared at all. The observer gives the direction of the object as NW at about 55 degrees elevation. DENEb was in the NW at about 45 degrees elevation. VEGAS was roughly in the NW at about 20 degrees elevation. And ALTAIR was in the West at at about 15 degrees elevation.
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



*There is no com on this case: he apparently  
got the 104 from [redacted] (sighting of 13 Sept 67)*

### U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object? <i>not sure</i> <i>1st and 2nd week</i> <u>November</u> 19 <u>67</u> Day Month Year		2. Time of day: <u>11</u> <u>00</u> <u>30</u> Hour Minutes (Circle One): A.M. or <u>P.M.</u>	
3. Time Zone: (Circle One): <u>a. Eastern</u> b. Central c. Mountain d. Pacific e. Other _____ (Circle One): <u>a. Daylight Saving</u> <u>b. Standard</u>			
4. Where were you when you saw the object? <u>[redacted]</u> <u>Kittanning</u> <u>Pennsylvania</u> Nearest Postal Address City or Town State or County			
5. How long was object in sight? (Total Duration) _____ <u>20</u> _____ Hours Minutes Seconds a. <u>Certain</u> c. Not very sure b. <u>Fairly certain</u> d. Just a guess 5.1 How was time in sight determined? <u>clock</u> 5.2 Was object in sight continuously? Yes <u>X</u> No _____			
6. What was the condition of the sky? DAY NIGHT a. Bright <u>a. Bright</u> b. Cloudy b. Cloudy			
7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object? (Circle One): a. In front of you d. To your left b. In back of you e. Overhead c. To your right f. Don't remember			



8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |                                      |                                     |                                  |
|---|--------------------------------------|-------------------------------------|----------------------------------|
| a. Appear to stand still at any time?           | <input checked="" type="radio"/> Yes | <input type="radio"/> No            | <input type="radio"/> Don't know |
| b. Suddenly speed up and rush away at any time? | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |
| c. Break up into parts or explode?              | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |
| d. Give off smoke?                              | <input checked="" type="radio"/> Yes | <input type="radio"/> No            | <input type="radio"/> Don't know |
| e. Change brightness?                           | <input checked="" type="radio"/> Yes | <input type="radio"/> No            | <input type="radio"/> Don't know |
| f. Change shape?                                | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |
| g. Flash or flicker?                            | <input checked="" type="radio"/> Yes | <input type="radio"/> No            | <input type="radio"/> Don't know |
| h. Disappear and reappear?                      | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |



14. Did the object disappear while you were watching it? If so, how?

*no*

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): Yes ☒ No ☐ Don't Know. IF you answered YES, then tell what it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): Yes ☒ No ☐ Don't Know. IF you answered YES, then tell what in front of: \_\_\_\_\_

17. Tell in a few words the following things about the object:

a. Sound *didn't hear any sound*

b. Color *yellow-white*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

*none*

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.



*triangle & direction*



20. Do you think you can estimate the speed of the object?

(Circle One)

Yes

☒ No

IF you answered YES, then what speed would you estimate? \_\_\_\_\_

21. Do you think you can estimate how far away from you the object was?

(Circle One)

Yes

☒ No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

☒ a. Inside a building

b. In a car

c. Outdoors

d. In an airplane (type)

e. At sea

f. Other \_\_\_\_\_

23. Were you (Circle One)

a. In the business section of a city?

☒ b. In the residential section of a city?

c. In open countryside?

d. Near an airfield?

e. Flying over a city?

f. Flying over open country?

g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

25. Did you observe the object through any of the following?

a. Eyeglasses

☒ Yes

No

e. Binoculars

☒ Yes

No

b. Sun glasses

Yes

☒ No

f. Telescope

Yes

☒ No

c. Windshield

☒ Yes

☒ No

g. Theodolite

Yes

☒ No

d. Window glass

☒ Yes

No

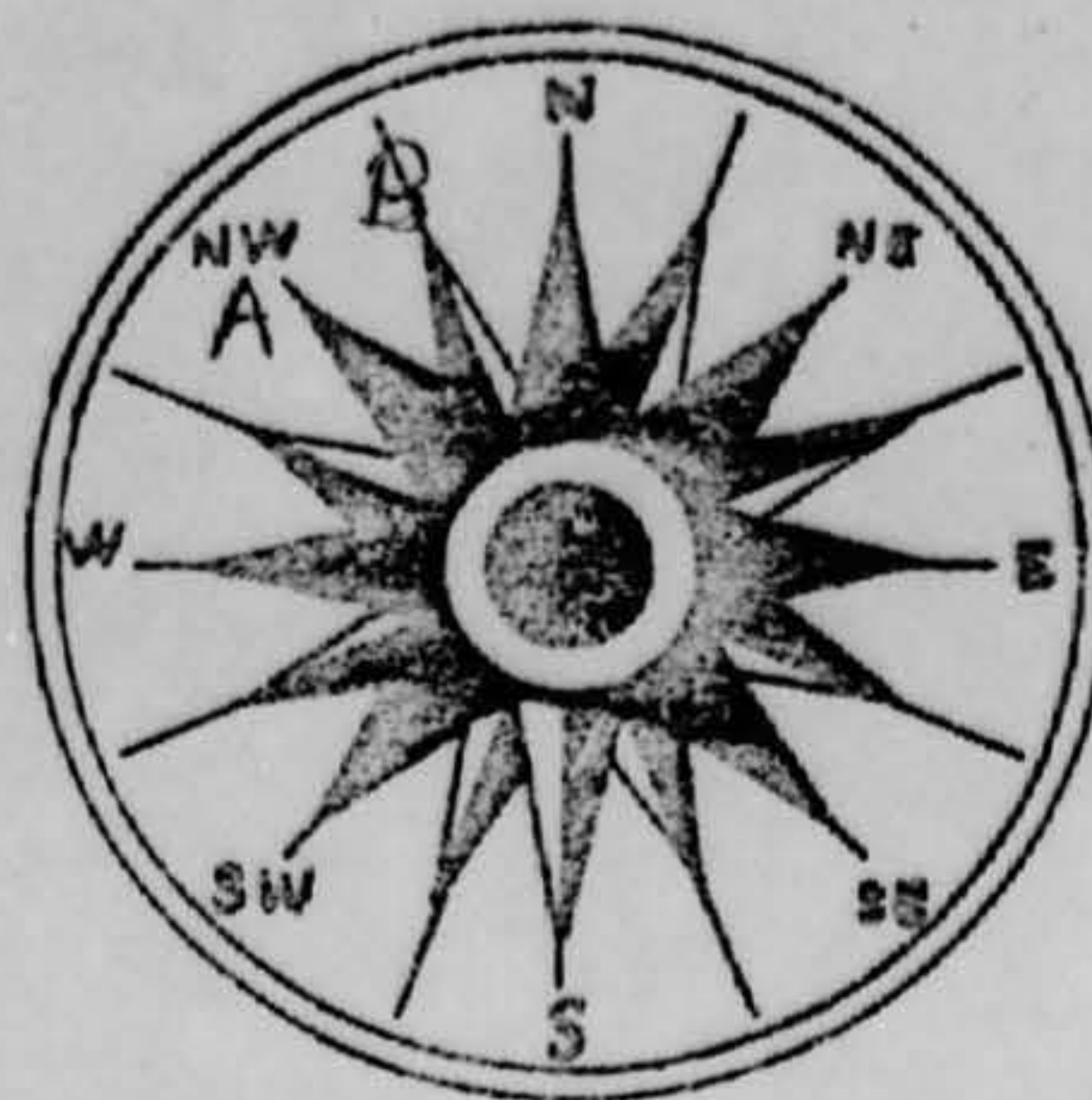
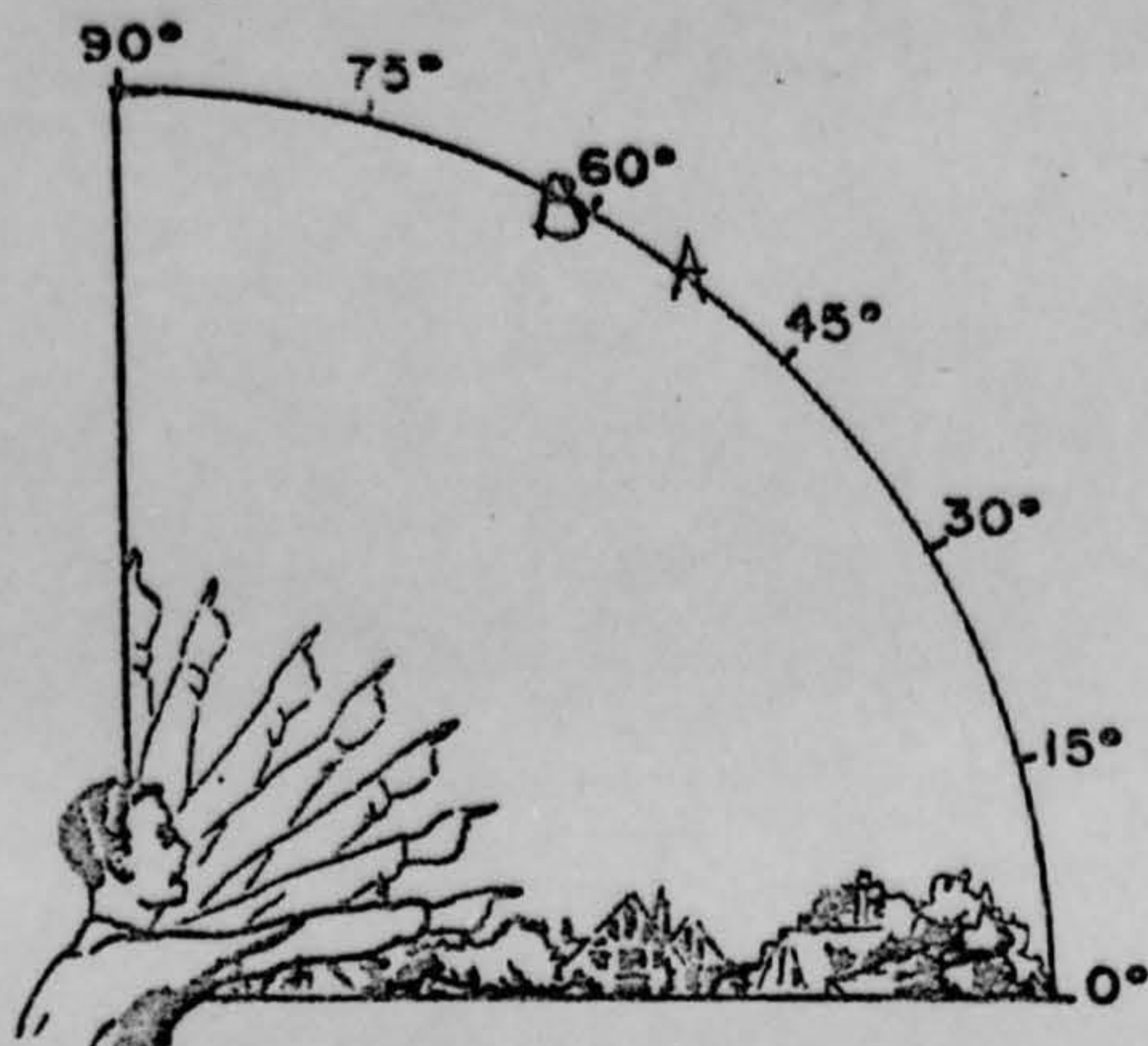
h. Other \_\_\_\_\_

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

*marble*



27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? \_\_\_\_\_  
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.



30. Have you ever seen this, or a similar object before. If so give date or dates and location.

*no*

31. Was anyone else with you at the time you saw the object? (Circle One) Yes ☐ No ☒

31.1 IF you answered YES, did they see the object too? (Circle One) Yes ☐ No ☐

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME [REDACTED] [REDACTED] [REDACTED]  
Last Name First Name Middle Name

ADDRESS [REDACTED] Kittanning 16201 Pa.  
Street City Zone State

TELEPHONE NUMBER [REDACTED] AGE 15 SEX F

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

30 11 1967  
Day Month Year

[REDACTED]



34. Date you completed this questionnaire:

6

Day

12

Month

1967

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.



Nov 67

TDPT (UFO)

Maj Quintanilla/70916/mhs/9 Jan 68

JAN 11 1968

UFO Observation, November 1967

[REDACTED] Street  
Kittanning, Pennsylvania 16201

1. Reference your unidentified flying object (UFO) observation of November 1967. We are currently using AF Form 117 as the official Air Force reporting form on UFOs. This form gives us much more information than the previous FTD Form 164. Request you complete the inclosed AF Form 117 on your observation.
2. Would you also answer the following questions.
  - a. How did the object disappear?
  - b. What do you mean when you say that a match held at arm's length would cover "none" of the object?
  - c. You observed the object for approximately twenty minutes, yet, you were the only observer; why was this?
3. Thank you for any additional information you can provide on your observation.

4.  
DIRECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Aerial Phenomena Office  
Aerospace Technologies Division  
Production Directorate

1 Atch  
AF Form 117 w/envelope

TDPT (UFO) OFFICIAL FILE CY